
EVALUATOR MANUAL TRANSMITTAL SHEET

<u>Distribution:</u> ____ All Child Care Evaluator Manual Holders ____ All Residential Care Evaluator Manual Holders <u>X</u> All Evaluator Manual Holders	<u>Transmittal No.</u> 07RM-08
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Subject:

REFERENCE MATERIAL – ENFORCEMENT ACTIONS

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Sections 1-0110, 1-0200, 1-0300, 1-0310, 1-0311, 1-0315, 1-0325, 1-0330, 1-0335,
1-0400, 1-0500

Filing Instructions:

REMOVE: Pages 1 & 2 Table of Contents, 22-29 and 32 - 37

INSERT: Pages 1 & 2 Table of Contents, 22-29 and 32 - 37

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**1-0100 NON-COMPLIANCE WITH THE LICENSING LAWS
AND REGULATIONS****1-0100**

One of the goals of the Community Care Licensing Division is to ensure that all licensees are in substantial compliance with the licensing laws and regulations. In keeping with this philosophy, it is the policy of the Division to ensure that licensees are afforded an opportunity to correct deficiencies which have an immediate or potential risk to the health, safety or personal rights of clients in care prior to initiating an administrative action. If deficiencies are corrected within a reasonable time frame and civil penalties are not assessed, the licensee is considered in substantial compliance with licensing standards.

A non-compliant facility is one in which the licensee has a history of immediate or potential risk deficiencies, civil penalty assessments and/or intentional disregard of licensing laws and regulations. If deficiencies are not corrected, as required by the Plan of Correction (Refer to Evaluator Manual Section 3-3600), then further enforcement actions may be necessary.

1-0110 CASE ASSESSMENT**1-0110**

There are a variety of circumstances which may lead the Licensing Program Analyst, Licensing Program Manager, and Regional Manager to recommend action against a licensee or applicant. There may be a licensee who chronically fails to comply with licensing requirements, or a situation where the Licensing Program Analyst has investigated and substantiated one or more complaints against a facility.

In addition, the Licensing Program Analyst may have received information from law enforcement, local health, fire, or sanitation officials, or sometimes from other sources, that the licensee or applicant in question has engaged in or is engaging in criminal conduct or other activity which creates a risk to the clients in care. In any of these circumstances, the Licensing Program Analyst, Licensing Program Manager and Regional Manager will have to do a total review of the case and decide on a course of action.

CASE ASSESSMENT CRITERIA

There are a variety of actions that can be taken with a non-compliant licensee or applicant. The particular type of action recommended may depend on any or all of the following factors:

- The seriousness of the problem(s).
- The risk of harm to clients in care.
- The length of time the Licensing Program Analyst has been working with the licensee or applicant to correct the problem(s).

1-0110 CASE ASSESSMENT (Continued)

1-0110

- The degree of cooperation or ability that the licensee or applicant exhibits to come into and remain in full compliance with regulations within the stated time frames.

The following are some of the most common indicators found in identifying a non-compliant facility. Normally, more than one of these indicators will be present in a non-compliant facility. The Licensing Program Analyst should use this list in conjunction with EM Section 3-4200, Facility Evaluation (Assessing the risk of violation) to determine whether to initiate a facility compliance plan, schedule a Non-Compliance Conference or submit a request for administrative action. This is not an all-inclusive list and there may be other issues or combination of problems that would necessitate one of the actions listed above.

1. Evidence of imminent danger to the clients due to:
 - a. Physical abuse
 - b. Sexual abuse
 - c. Questionable/wrongful death
 - d. Serious unexplained injuries
 - e. Serious medical emergency
 - f. Lack of supervision resulting in any of the above
 - g. Neglect or abandonment of facility/clients by licensee or staff
 - h. Accessibility of bodies of water
 - i. Leaving vulnerable clients unattended in automobiles
 - j. Accessibility of firearms and ammunition
 - k. Serious physical plant, structural, or fire safety issues
2. The fire clearance (if required) has been denied or revoked.
3. The licensee, employee, or non-client resident has been arrested for or convicted of a non-exemptible crime or a violent felony or misdemeanor or has had an exemption granted for a criminal record conviction and then receives a subsequent conviction.
4. The licensee has a history of citations and civil penalties for Criminal Background clearance violations.
5. The licensee continues to use corporal punishment after the licensee has been cited and advised that this is a personal rights violation.
6. The facility has a history of Type A or B violations cited during a facility visit. Please refer to Reference Material Section 3-4200 on Facility Evaluation for the definitions of Type A and B violations.
7. The licensee has a history of not correcting Type A or Type B violations within the Plan of Correction date.

1-0110 CASE ASSESSMENT (Continued)**1-0110**

8. The licensee has been assessed civil penalties two or more times for the same violation(s).
9. The licensee has a history of intentional disregard or willful violation of the licensing laws and regulations where the same type of deficiencies have been cited over a period of time.
10. The licensee is or has operated an unlicensed facility prior to becoming licensed.
11. The licensee is operating the facility with minimal financial resources which has affected the care and supervision of clients and the facility's operation.
12. The licensee has a history of hiring unqualified staff.
13. The facility has a pattern of continual overcapacity.
14. There are misdemeanor arrests or convictions of licensee or employees.
15. The licensee has expanded their business to include three or more facilities over a short period of time which has affected the facility's operations and has seriously affected the licensee's ability to meet the needs of the clients.
16. The facility is unsanitary, constantly dirty and poorly maintained.
17. The facility has a history of high turnover in administrative and direct care staff.
18. The facility has a history of no planned activities/programs for their clients.
19. The facility has a history of inadequate storage and retention of medications or mismanagement and recording of medications.
20. The facility has a history of poor food service/storage.
21. Adverse conditions exist which have a direct relationship to the health and safety of clients.
22. Conditions indicate a lack of respect for human dignity.
23. Evidence indicates licensees or employees have aided, abetted or permitted violations of laws or regulations.
24. Misuse of client's cash resources has occurred.

1-0110 CASE ASSESSMENT (Continued)**1-0110**

- 25.** Evidence exists of conduct in the operation and/or maintenance of a facility which is inimical to the health, morals, welfare or safety of clients or the people of California.

Keep in mind, when assessing a case, that California Department of Social Services and its agents, State and county licensing staff, are delegated by law with the responsibility of protecting clients in care. Failure of a Licensing Office to take appropriate action in a given case could result in liability to the State and/or county. Moreover, if a Licensing Program Analyst knowingly allows a dangerous situation to exist without using the resources of the State and/or county to abate the problem, and a client is harmed as a result, he or she could incur some personal liability.

Once a facility has been identified as non-compliant, the next step is the completion of the facility compliance plan, unless the problems are serious enough to proceed with stronger actions. Refer to Section 1-1010. If so, consult with the **Licensing Program Manager** immediately.

1-0200 FACILITY COMPLIANCE PLAN**1-0200**

The Licensing Program Analyst is responsible for initiating the LIC 9112, Facility Compliance Plan Form. The LIC 9112 is designed to help formalize a plan of specific actions for the **Licensing Program Analyst** to use to resolve facility problems with the licensee prior to **holding an informal meeting with the Licensing Program Manager or a Noncompliance Conference with the Regional Manager**. Prior to a meeting with the **Licensing Program Manager**, the Licensing Program Analyst will do a complete review of the facility's licensing file to determine patterns of noncompliance, type of violations (A or B), period of time the facility has been out of compliance, and whether the clients are at risk or potential risk. The Licensing Program Analyst **analyzes** this information, **and develops** a concise statement of the problem, including a recommended course of action.

The Licensing Program Analyst **must** discuss the case with the **Licensing Program Manager** and Regional Manager who will then decide whether the issues are serious enough to discuss the problems with the Licensing Office's assigned Legal Consultant. If so, the **Licensing Program Manager** or Regional Manager will contact the Consultant and note the recommended course of action.

The Licensing Program Analyst **initiates** a facility compliance plan, by completing the top part and Sections A and B. Section C or the Legal Consultant's recommendation will be completed by either the **Licensing Program Manager** or Regional Manager. The options for the **Licensing Program Manager** are either to concur, request additional data or generally disagree with the plan developed by the Licensing Program Analyst. After making a decision, the Licensing Program Manager will complete Section D and forward the plan to the Regional Manager.

1-0200 FACILITY COMPLIANCE PLAN (Continued)**1-0200**

The Regional Manager will either approve or reject the plan by completing Section E. If there is agreement that the Licensing Program Analyst and **Licensing Program** Manager should have an Informal Meeting with the licensee, a discussion with the Regional Manager should take place prior to the scheduled Informal Meeting. If the recommendation is to proceed to a **Non-Compliance** Conference, a copy of the LIC 9112 is to be sent to the Assistant Program Administrator or Program Administrator when the Regional Manager determines the case is likely to be escalated due to complaints, media attention, etc.

At the Informal Meeting, the Licensing Program Analyst and **Licensing Program** Manager thoroughly go over the facility compliance plan with the licensee, reach an agreement for correcting the problems and answer any questions and/or concerns the licensee may have.

During the Informal Meeting, other contacts and resources should be made available to the licensee to assist them in reaching substantial compliance with licensing laws and regulations. The **Audit** Section (refer to Section 1-0700, Audit Services) is available to assist the licensee in obtaining compliance with the safeguarding of client/resident cash resources.

For example, problem licensees may, as part of the Plan of Correction be required to attend a training session in the Licensing Office, where training is presented by the auditor and Licensing Program Analyst. The licensee has the right to agree or decline any assistance that is offered to them.

A summary of the Informal Meeting will be completed on the LIC 809 by the Licensing Program Analyst, signed by the licensee/administrator and given to the licensee outlining what took place during the meeting and specifics concerning plans for correcting the deficiencies. If it is not feasible to complete the summary during the meeting, **the LIC 809 will still be issued, however, it must be documented on the form that detailed information regarding the conference will follow. The follow-up letter or correspondence should be sent by certified mail to the licensee within five calendar days of the conference. This shall be documented and reflected on the Field Automation System (FAS). (See EM Section 3-3011, Documentation Requirements for Child Care Facilities, regarding additional documentation needed on the LIC 809 or letter).**

The licensee should be advised at the end of the Informal Meeting that failure to correct deficiencies by the given due dates, agreed upon during the meeting, could result in a **Non-Compliance** Conference.

The Licensing Program Analyst shall make an unannounced follow-up evaluation to verify that the corrections have been accomplished within the agreed upon time frame.

NOTE: Informal Meetings or **Non-Compliance Conferences are not appropriate in**

1-0200 FACILITY COMPLIANCE PLAN (Continued)**1-0200**

situations of physical and sexual abuse or where there is imminent risk to the clients. These cases should be referred immediately to the Legal Division.

(All references to FAS apply to Community Care Licensing staff and do not apply to counties.)

1-0300 NON-COMPLIANCE CONFERENCE**1-0300**

The purpose of the Non-Compliance Conference is to, in the presence of the Regional Manager, review problem areas and impress upon the licensee the seriousness of the situation. The need for a Non-Compliance Conference may arise from a series of repeated licensing violations, issuance of civil penalties, informal meetings or telephone conversations with the licensee. The licensee should be informed that unless deficiencies are corrected and continued compliance is maintained, the case will be referred to the Legal Division for administrative action. In addition, it must be made clear to the licensee that the conference does not in any manner excuse past problems or resolve the Department's case against the licensee if the problems are not corrected. The Non-Compliance Conference may be the last step prior to initiating administrative action following unsuccessful attempts by the Licensing Program Analyst and Licensing Program Manager to gain compliance.

If a licensee's non-compliance issues could warrant legal action but, after a careful assessment of the case, the Regional Manager decides to work with the licensee and not proceed with the legal action, a Non-Compliance Conference must be held. If Licensing Office staff have any questions concerning the need for a Non-Compliance Conference, rather than going directly to an administrative action, the Licensing Office's assigned Legal Consultant should be consulted for guidance.

Prior to a Non-Compliance Conference, Licensing will notify the licensee in writing of the time, date, place and reason for the conference. Refer to Section 1-0315 for a sample letter to be sent to licensee. The licensee is also told that he or she may bring his or her administrator, legal representative, CEO, or whomever he or she chooses to the conference.

Prior to the conference, the Licensing Program Analyst, Licensing Program Manager, Regional Manager and any other interested or pertinent party (county representative, Department of Education Child Development Division Representative, etc.) shall meet to discuss the case and the conference presentation. This discussion should occur promptly and when applicable.

1-0310 DOCUMENTING THE NON-COMPLIANCE CONFERENCE**1-0310**

The Non-Compliance Conference shall be documented on a LIC 9111. Prior to the conference, the portion of the LIC 9111 with information identifying the facility and the list of issues or deficiencies should be completed. The remainder of the form is completed during the Non-Compliance Conference. All individuals attending the conference must be listed on the LIC 9111. Additionally, the form must provide a summary of what was agreed upon between the licensee and the Regional Manager in order to bring the facility into compliance, the plan of action date and the consequence(s) to the licensee if he/she fails to take the actions within the date(s) specified on this form. Community Care Licensing Division staff will document this process via the Field Automation System (FAS).

It is imperative that the LIC 9111 is concise, complete and focused on the issues and facts. Once the LIC 9111 is completed, request that the licensee sign the form, the Regional Manager will sign and a copy will be provided to the licensee.

There may be instances when it is not feasible to complete the LIC 9111 at the time of the conference. During such conferences, there may be numerous issues that need to be discussed with Department staff prior to completing the summary. At times, the Licensing Office's assigned Legal Consultant may need to be contacted after the conference regarding information and issues that emerge during the conference. In these situations, the LIC 9111 will still be issued, however, it must be documented on the form that detailed information regarding the conference will follow. The follow-up letter or correspondence should be sent by certified mail to the licensee within five calendar days of the conference. This shall be documented and reflected in FAS. (See EM Section 1-0311 Documentation Requirements for Child Care Facilities, regarding additional documentation needed on the LIC 809 or letter.)

(All references to FAS apply to Community Care Licensing staff and do not apply to counties.)

1-0311 DOCUMENTATION REQUIREMENTS FOR CHILD CARE FACILITIES**1-0311**

Whenever a child care licensee or designee attends a meeting conducted by a local licensing agency management representative and issues of Non-Compliance are discussed (Informal Meetings, Non-Compliance Conferences, and Compliance Conferences), the licensee must provide a copy of the licensing document to parents of each child in care and to parents of any children that enroll in the facility during the following 12 months. This information must be reflected on any licensing document resulting from the meeting.

1-0315 SAMPLE NON-COMPLIANCE CONFERENCE LETTER LANGUAGE 1-0315

Date

(Licensee Name)

(Facility Name)

(Address)

(City, State, Zip)

Dear _____:

The policy of Community Care Licensing Division is to ensure that licensees are afforded an opportunity to correct deficiencies prior to our initiating legal action to close a facility. With the exception of situations where an immediate danger to clients exist, staff from the Regional Office will work with the licensee to gain compliance and whenever possible, to prevent the closure of the facility.

In order to accomplish this goal, a **Non-Compliance** Conference is held with the licensee prior to referring a case for legal action. Due to problems that currently exist at your facility, we would like to give you an opportunity to bring your facility into compliance. Therefore, we have scheduled a conference with you on _____, at _____ in the _____ Regional Office at the above address. Your attendance at this conference is mandatory.

The purpose of the conference is to discuss the existing deficiencies, any current problem areas in the operation of your facility, the seriousness of the situation, and the legal action which will be taken by the Department if the situation is not corrected. Your continued noncompliance will result in a referral for legal action, so it is extremely important that all deficiencies be corrected in a timely manner.

If you wish, you may bring someone to help you in this review. It can be any person or persons of your choosing who may be of assistance to you. Also, if you are unable to keep this appointment, please contact _____ at () _____, immediately so we may reschedule it as soon as possible.

Sincerely,

Regional Manager

1-0320 COMPLIANCE PLAN CONFERENCE CRITERIA**1-0320**

The Compliance Plan is a Plan of Correction submitted by the licensee and the Regional Office that establishes specific actions the provider will take to improve the operation of the facility. The Compliance Plan is an enforcement tool that may be appropriate in a variety of situations where enforcement intervention is warranted. It is not an option when there is an immediate threat to the health and safety of clients or in situations where the safety of clients is of concern.

The Compliance Plan may be used in lieu of a request for legal review when there is clear evidence that the licensee is willing and able to maintain compliance with licensing regulations and statutes. The licensee must also be capable of providing the level of care and supervision needed by clients in care.

The Compliance Plan may be used in the following situations:

- The facility provides marginal care for clients as documented in licensing reports but has demonstrated the ability to improve the quality of care and supervision.
- The facility has a history of coming into compliance after being cited, but fails to remain in substantial compliance.
- The licensee is cooperative and has made a good faith effort to comply, but needs additional training and consultation.
- The evidence justifies an enforcement action, but probation rather than revocation of the license is the desired or likely outcome. The likelihood of probation must be confirmed by consultation with the Licensing Office's assigned legal consultant.

The Compliance Plan is a demonstration of the licensee's intention to make a good faith effort to comply and remain in substantial compliance with licensing regulations and statutes. If the licensee fails to maintain compliance with the conditions established in the plan, revocation action may be pursued.

The Compliance Plan does not preclude the Department from initiating administrative action if the licensee fails to implement and maintain improvements to the quality of care and supervision or fails to make other changes as reflected in the plan. The Compliance Plan should be viewed as an additional way of responding to problem facilities, especially those facilities with other than serious health and safety problem histories.

- The Compliance Plan may be used with all categories of facilities and may be used independent of the Non-Compliance Conference.
- It does not preclude additional citations by the Licensing Program Analyst.

1-0320 COMPLIANCE PLAN CONFERENCE CRITERIA (Continued)**1-0320**

- The Licensing Agency may make additional visits to ensure compliance.
- It does not prohibit the assessment of Civil Penalties.
- It does not prohibit the subsequent issuance of an Accusation, employee exclusion or temporary suspension order if conditions warrant.
- It does not preclude the assessment of Civil Penalties.
- It will become part of the facility's plan of operation for the duration of the plan.

The Compliance Plan is a public document signed by the licensee and Regional Manager that (1) clearly describes the licensing violations which have occurred, (2) identifies the corrections which the licensee will implement and the time frames for implementation, (3) spells out the consequences for failure to fulfill the terms in the plan and (4) preserves the Department's options, should the situation require additional action. A copy of the plan will be maintained in the facilities public file and failure to abide by the conditions of the plan may result in a referral for revocation without the need to conduct a Non-Compliance Conference.

1-0325 SAMPLE COMPLIANCE PLAN CONFERENCE LETTER **LANGUAGE** 1-0325

Date _____

Licensee Name _____
Corporate President _____
Facility Name _____
Facility Address _____
Facility Type _____

Dear Licensee,

The California Department of Social Services, Community Care Licensing Division has determined that Licensee _____, who is licensed to operate [FACILITY NAME AND ADDRESS], has violated licensing laws in the following general categories: ☐ Personal Rights ☐ Financial Issues ☐ Personnel: Qualifications and Duties ☐ Food Services ☐ Reporting Requirements ☐ Record Keeping Health Related/Incidental Medical Services ☐ Client Supervision, Assistance and Care ☐ License Limitations ☐ Physical Plant ☐ Other. These violations are described in licensing reports and other documents dated _____, and _____.

Licensee(s)/Corporate President/Board of Directors acknowledge responsibility for the deficiencies cited in licensing reports and other documents referenced above.

Licensee(s) Corporate President/Board of Directors _____, having fully reviewed the facility file, which details citations for violations of the Health and Safety Code and/or Title 22 of the California Code of Regulations, submit the following Compliance Plan to correct or remedy these deficiencies in compliance.

LICENSEE'S COMPLIANCE PLAN

The licensee agrees to make specific operational changes with regard to the administration and operation of the facility. (N)

(For Example)

- The licensee/administrator will be present at facility _____ number of hours per week.
- Staff for a.m. and p.m. shifts will be increased to a total of _____ for a.m. and _____ for p.m.

1-0325 SAMPLE COMPLIANCE PLAN CONFERENCE LETTER LANGUAGE 1-0325
(Continued)

- Quarterly training for all direct care staff in the areas of medication storage, handling, dispensing, and record keeping will be given or obtained.

The licensee acknowledges receiving a copy of statutes/regulations and fully understands the licensing requirements pertaining to the operation of the facility. (M)

After review, it appears to the Department that this Compliance Plan addresses the deficiencies in compliance listed above. The Department will monitor the licensee's compliance with the Compliance Plan over the next [TIME PERIOD] to determine whether the licensee is operating the facility in a manner consistent with the law and the Compliance Plan. The licensee understands and acknowledges that the Department, at its discretion, will make unannounced case management visits to monitor the licensee's compliance with this Compliance Plan. (M)

During the time period when the Compliance Plan is in effect, if the Department determines that the licensee has violated the law or that the Compliance Plan is inadequately implemented to remedy the licensee's noncompliance, the Department, in its discretion, may refer the facility for revocation of the license or other appropriate administrative action. (M)

By accepting this Compliance Plan and monitoring the facility's operation under the terms agreed to by the licensee, the Department is not deprived of its authority to take appropriate formal legal action under the Health and Safety Code when such action is deemed necessary by the Director. (M)

In the event that formal legal action is taken, nothing in this plan precludes the Department from including non-compliance issues referred to in this Compliance Plan. (M)

Regional Manager _____ Date _____

Licensee/Board President _____ Date _____

N – To Be Negotiated

M – Mandated

c: File
 Licensee
 Program Administrator

1-0330 COMPLIANCE PLAN CONFERENCE OFFICE PROCEDURES**1-0330**

When the Licensing Program Analyst identifies a facility with non-compliance issues that may be resolved by the use of the Compliance Plan:

1. The Licensing Program Analyst reviews the file, completes a “Facility Compliance Plan Form” (LIC 9112), informs the **Licensing Program** Manager of the situation and recommends the use of a Compliance Plan conference.
2. The **Licensing Program** Manager reviews:
 - a. The Licensing Program Analyst’s documentation and recommendation for a Compliance Plan.
 - b. Any plans of correction previously developed by the licensee.
 - c. Summaries of any non-compliance conferences previously held with this licensee.
3. The **Licensing Program** Manager and Licensing Program Analyst develop a Compliance Plan tailoring the plan to the specific compliance issues identified.
4. The **Licensing Program** Manager makes recommendations and submits the plan to the Regional Manager for review.
5. The Regional Manager reviews:
 - a. The summary of the Non-Compliance Conference or other enforcement/consultation actions.
 - b. The current status of any deficiency reports.
 - c. The recommendation and rationale for the Compliance Plan.
6. The Regional Manager advises the Program Administrator of the intended action.
7. County licensing personnel advise the regional county liaison of the proposed use of the Compliance Plan.

**1-0330 COMPLIANCE PLAN CONFERENCE OFFICE
PROCEDURES (Continued)****1-0330**

8. The Regional Manager advises the Program Administrator of the intended action.
9. County licensing personnel advise the regional county liaison of the proposed use of the Compliance Plan.
10. The Regional Manager sends the licensee a letter explaining the Department's desire to enter into a Compliance Plan in order to bring the facility into compliance and avoid taking administrative action. A copy of the draft Compliance Plan proposed by the Department may be sent with the letter. A meeting date and time are specified to review the file, go over the plan and obtain signatures. If the licensee does not wish to participate, the matter will be referred for administrative action.

There are two components to a Compliance Plan Conference: (1) The licensee reviews the facility file, (2) The licensee meets with the Regional Manager, Licensing Program Analyst and **Licensing Program** Manager to discuss the plan. In this meeting:

- Violations are reviewed.
- Corrective actions and time frames are developed and agreed upon.
- Consequences for failure to comply are reviewed.

Three copies of the plan are signed: One for the licensee, one for the facility's public file, one for the Statewide Program Office. Regional Offices will identify/flag the files of facilities, which have signed Compliance Plans in the same way legal cases are identified. A log will be maintained of all facilities with Compliance Plans. Licensing Program Analysts will flag all facilities with Compliance Plans on the problem facility log.

Periodic site visits may be conducted by the Licensing Program Analyst to ensure compliance. Violations of the conditions will be reviewed by the Local Unit Manager/Licensing Program Analyst and a recommendation for amending, dissolving, or continuing the plan will be forwarded to the Regional Manager for decision. If dissolution is sought, administrative action will be initiated through the standard legal process and a letter of dissolution sent to the licensee with copies to the facility's file and Program Administrator.

1-0335 LETTER LANGUAGE TO SCHEDULE A COMPLIANCE PLAN MEETING 1-0335

Date _____

Licensee Name _____

Address _____

City, State Zip Code _____

RE: Facility Name and Facility Number

Dear Licensee,

The _____ Regional Office has reviewed the licensing history of your facility(ies), including prior citations and efforts to achieve compliance with licensing requirements and has concerns regarding noncompliance issues relating to deficiencies with Title 22 of the California Code of Regulations. We would like to offer you the opportunity to enter into a Compliance Plan with this office. The Compliance Plan establishes specific actions you will take to improve the operation of your facility. We anticipate that participation in this plan will help minimize the need for administrative action against your license.

A meeting has been scheduled at the _____ Regional Office at _____ on _____ at _____ a.m./p.m. to discuss a Compliance Plan for your facility. Your facility file will be available for your review; please allow ample time before the meeting to review you file. (Optional – A proposed plan has been enclosed for your review and will be a starting point for our discussion).

The Department appreciates your anticipated cooperation and willingness to participate in this Compliance Plan. If you have any questions, you may contact your Licensing Program Analyst at () _____.

Sincerely,

Regional Manager

c: File

Licensee

Program Administrator

1-0400 SUPPORT UNITS**1-0400**

The Department uses investigative and support units to assist in cases both before and after they are referred to the Legal Division for administrative action. The following sections define the purpose and functions of the Program Investigations (1-0600) and the Audit Section (1-0700).

1-0500 TECHNICAL SUPPORT PROGRAM (REPEALED 11/07)**1-0500****1-0600 PROGRAM INVESTIGATIONS****1-0600**

Under the direction of the Program Administrators, Program Investigations receives requests for investigative services from the Regional Offices within the Community Care Licensing Division, the California Department of Social Services Legal Division and other authorized sources.

1-0610 INVESTIGATIVE SERVICES**1-0610**

Program Investigations provides five types of investigative services:

1. **Investigation:** Objective investigation of the complaint to determine the validity of the allegations, determine the findings, recommend course of action, and prepare written report.
2. **Investigation Assignment:** Specific investigative tasks (e.g., obtaining criminal record verification, police reports, or hospital records, serving temporary suspension orders, interviewing suspects or victims).